

2700 INTERNAL TRANSFER REQUEST FOR S.N.

02/19/27,735

DATE: <u>1-18-02</u>	FROM: <u>Chauhan</u> (print name)
FORWARD TO: A. Art Unit: <u>2644</u> B. Class: <u>379</u> C Subclass: <u>HP</u>	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input checked="" type="checkbox"/> (check box) D. See Claim(s): <input checked="" type="checkbox"/>

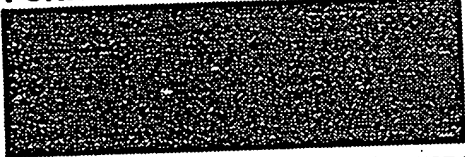
FURTHER EXPLANATION IF NEEDED:

no audio or speech processing

DATE: _____	FROM: _____ (print name)
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

See Spec. Page 1, Your Examiners did parent cases.

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER 	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED: